11-23-04

PTO/SB/31 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
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NOTICE OF APPEAL FROM THE EXAMINER TO			Docket Number (Optional)						
THE BOARD OF PATENT APPEALS AND INTERFERENCES			59182/P004US/10020641						
	In re Application	n of							
	Tony M. Brew	∕er et al.							
Application Number Filed									
	09/703,038-Conf. #8896 October 31, 2000								
	For SYSTEM AND METHOD FOR ROUTER DATA AGGREGATION AND DELIVERY								
	/ " " "								
	Art Unit		Examiner						
		2661	A. T. Ton						
Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.									
The fee for this Notice of Appeal is (	37 CFR 41.20(b)(1	))	\$340.00						
Applicant claims small entity st above is reduced by half, and t			e fee shown \$170.00						
x A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
The Director has already been authorized to charge fees in this application to a Deposit Account.  I have enclosed a duplicate copy of this sheet.									
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 06-2380 . I have enclosed a duplicate copy of this sheet.									
A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.									
			$\mathcal{M}_{\mathcal{D}}$						
I am the									
applicant /inventor.									
assignee of record of the er	itire interest	_	Signature						
See 37 CFR 3.71. Stateme	ent under 37 CFR	3.73(b)	Michael A Dendes						
is enclosed. (Form PTO/SI	3/96)	-	Michael A. Papalas Typed or printed name						
attorney or agent of record.			Typed of printed fidure						
Registration number			(24.4) OFF 04.06						
	- 27 OED 4 24	_	(214) 855-8186 Telephone number						
x attorney or agent acting unde		40.204	·						
Registration number if acting ur	ider 37 CFR 1.34.	40,381	November 22, 2004  Date						
NOTE: Signatures of all the inventors	r accionace of re-	rd of the entire interest							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
	<del></del>								
*Total of 1 forms a	are submitted.								

11/24/2004 SSITHIB1 00000107 09703038

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T rease note reques	Complete if Known								
FEE TRANSMITTAL  for FY 2005  Effective 10/01/2004. Patent fees are subject to annual revision.			Complete if Known Application Number 09/703,038-Conf. #8896						
				Numbe	<del></del>				
			Date	1 1		October 31, 2000			
			Named iner Na		A. T. Ton	Tony M. Brewer			
			inei iva	ine		-			
Applicant claims small entity status. See 37 CFR 1.27			nit		2661				
TOTAL AMOUNT OF PAYMENT (\$) 170.00		Attorney Docket No.			59182/P004US/10020641				
METHOD OF PAYMENT (check all that apply)				FEE	CALCULATION (continued)				
X Check Credit Money Order Other None		3. ADDITIONAL FEES							
Deposit Account:									
Deposit		Entity	Small	Entity	_				
Account 06-2380		Fee (\$)	Code	Fee (\$)	Fee Description	Fee Paid			
Deposit Account Fulbright & Jaworski L.L.P.		130	2051	65	Surcharge – late filing fee or oath				
Name	1052	50	2052	25	Surcharge – late provisional filing fee or cover				
The Director is authorized to: (check all that apply)  Charge (ac(s) indicated below.		130	1053	120	sheet.				
Charge fee(s) indicated below X Credit any overpayments				130	Non-English specification				
X Charge any additional fee(s) or any underpayment of fee(s)		2,520	1812		For filing a request for ex parte reexamination				
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		920*	1804	920*	Requesting publication of SIR prior to Examiner action				
X application X application		1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
FEE CALCULATION		110	2251	55	Extension for reply within first month				
1. BASIC FILING FEE		430	2252	215	Extension for reply within second month				
Large Entity Small Entity	1253	980	2253	490	Extension for reply within third month				
Fee Fee Fee Fee Fee Description Fee Paid  Code (\$) Code (\$)	1254	1,530	2254	765	Extension for reply within fourth month				
1001 790 2001 395 Utility filing fee	1255	2,080	2255	1,040	Extension for reply within fifth month				
1002 350 2002 175 Design filing fee	1401	340	2401	170	Notice of Appeal	170.00			
1003 550 2003 275 Plant filing fee	1402	340	2402	170	Filing a brief in support of an appeal				
1004 790 2004 395 Reissue filing fee	1403	300	2403		Request for oral hearing				
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 0.00	1452 1453	110 1,370	2452 2453		Petition to revive – unavoidable Petition to revive - unintentional				
A EVERA CLAIM FEED FOR LITH ITV AND RESOUR	1501	1,370	2501		Utility issue fee (or reissue)				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE  Extra Fee from	1502	490	2502		Design issue fee				
Total Claims below Fee Paid	1503	660	2503		Plant issue fee				
Independent	1460	130	1460	130	Petitions to the Commissioner				
Claims — — — — — — — — — — — — — — — — — — —	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)				
Multiple Dependent = = = =	1806	180	1806		Submission of Information Disclosure Stmt				
Large Entity Small Entity Fee					Recording each patent assignment per				
Code (\$) Code (\$)	8021	40	8021	40	property (times number of properties)				
202 18 2202 9 Claims in excess of 20		790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))				
1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claim, if not paid		790	2810	395	For each additional invention to be examined (37CFR 1.129(b))				
1204 88 2204 44 ** Reissue independent claims		790	2801	395	Request for Continued Examination (RCE)				
over original patent  1205 18 2205 9 ** Reissue claims in excess of 20		900	1802	900	Request for expedited examination of a design application				
and over original patent		fee (spe	cify)						
SUBTOTAL (2) (\$) 0.00	*Redu	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 170.00							
**or number previously paid, if greater; For Reissues, see above									
SUBMITTED BY (Complete (if applicable))									
Name (Print/Type) Michael A Papalas		ration No ey/Agent)		,381_	Telephone (214) 855-8186				
Signature					Date November 22, 2	004			